

PATROL AREA: _____

Fort Benning Quarters Check Form

(1) NAME: _____ (2) RANK: _____ (3) DATE: _____

(4) ADDRESS: _____ (5) HOUSING AREA: _____

(6) DATES: FROM _____ TO _____ (7) LIGHTS LEFT ON (CIRCLE) Y / N

(8) # OF VEHICLES LEFT AT QUARTERS: _____ (9) ANIMALS LEFT AT QUARTERS: _____

(10) VEHICLE MAKE AND MODEL: _____

(11) OTHER PEOPLE AUTHORIZED TO ENTER QTRS: _____

(12) POC (FOR EMERGENCY USE) NAME: _____

(13) POC ADDRESS: _____ (14) POC PHONE: _____

(15) SPECIAL INSTRUCTIONS: _____

(16) I DO GIVE THE MILITARY POLICE PERMISSION TO SEARCH MY QUARTERS SHOULD MY QUARTERS AT ANY TIME BE FOUND UNSECURED.

SIGNATURE: _____ DATE: _____

DATE	TIME	MP INITIALS	STATUS		DATE	TIME	MP INITIALS	STATUS

MP NOTES: CONDITION OF QUARTERS, DAMAGES, ETC: _____
